

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023

**Your Name:** Carlos Enrique Leiva Sisnieguez

**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**

**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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<b>Time frame: past 36 months</b>								
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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



LEIVA SISNIEGUEZ CARLOS ENRIQUE  
M.P. 115,915 M.N. 131,895  
Jefe de Unidad de Investigación  
Servicio de Docencia e Investigación  
H.I.G.A. Gral. San Martín de La Plata

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023  
**Your Name:** Ricardo D. Olano  
**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

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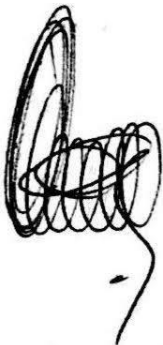
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Please place an "X" next to the following statement to indicate your agreement:

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Dr. RICARDO DANIEL OLANO  
 Especialista Universitario  
 en Cardiología  
 MP:110957

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023  
**Your Name:** Patricia M. Carrera Ramos  
**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

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Dra. Patricia Carrera Ramos  
 148044974 INMEDIOS DE COMUNICACION Y PUBLICIDAD  
 N.I.P. 117.049

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023

**Your Name:** Martin R Salazar

**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**

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Martin R Salazar

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**Your Name:** Ana de Iraola  
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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



\_\_\_\_\_  
**Dr. DE IRAOLA, ANA**

\_\_\_\_\_  
M.P. 114340

\_\_\_\_\_  
Cardiología

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023  
**Your Name:** Camilo Martínez  
**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



CAMILO MARTÍNEZ  
DNI 29763461  
MP 115998

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023  
**Your Name:** Betty Cecilia Leiva Sisniegues  
**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

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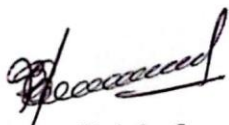
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**B. Cecilia Leiva S.**  
 Especialista en Clínica Médica  
 Especialista en Hipertensión Arterial  
 M.P. 116.304 - M.N 131888

Escaneado con CamScanner

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023

**Your Name:** Julián Minetto

**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**

**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i4.20675

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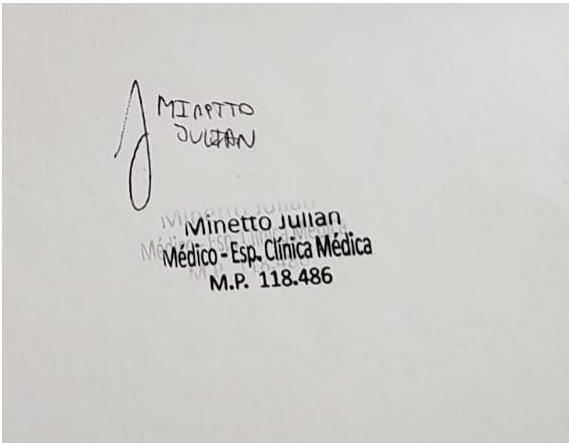
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.



## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023  
**Your Name:** Daniela R. Gómez  
**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**  
**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i5.20675

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

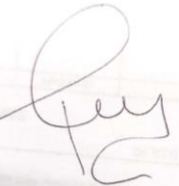
	Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)						
<b>Time frame: Since the initial planning of the work</b>								
<b>1</b>	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td style="width: 40%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <p style="font-size: small; text-align: right; margin-top: 5px;">Click the tab key to add additional rows.</p>						
<b>Time frame: past 36 months</b>								
<b>2</b>	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td style="width: 40%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
<b>3</b>	Royalties or licenses	<input checked="" type="checkbox"/> <b>None</b> <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td style="width: 40%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						

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Dr. Gomez-Daniels  
#P116731

## ICMJE DISCLOSURE FORM

**Date:** 15/10/2023

**Your Name:** Walter G. Espeche

**Manuscript Title:** **Desarrollo de un modelo por inteligencia artificial con hemodinamia no invasiva para predecir preeclampsia en embarazos de alto riesgo**

**Manuscript Number (if known):** http://dx.doi.org/10.7775/rac.es.v91.i5.20675

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 Espeche Walter.  
 DNI 27641244